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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	't 1:	Identify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	your pictu exar licer Brin- iden	e the name that is on a government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your etting with the trustee.	Geoffrey First name Paul Middle name Woods Last name and Suffix (Sr., Jr., II, III)	Ī	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.			
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-9687		

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Debtor 1 Geoffrey Paul Woods

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	507 N. Genesee Street Apt. 2A	If Debtor 2 lives at a different address:		
		Morrison, IL 61270 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Whiteside County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Geoffrey Paul Woods

Case number (if known)

ar	Tell the Court About	Your I	Bankruptcy Ca	ase					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	Chapter 7							
			Chapter 11						
			Chapter 12						
			Chapter 13						
3.	How you will pay the fee	Il pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your loc about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, ca order. If your attorney is submitting your payment on your behalf, your attorney may pay with a gap re-printed address.				n, cashier's check, or money			
					nstallments. If y ents (Official Fori		e this option, sig	n and attach the Applica	ation for Individuals to Pay
			I request that	at my fee be	waived (You ma	y request			oter 7. By law, a judge may,
			applies to yo	ur family size	and you are una	able to pay	/ the fee in insta		of the official poverty line that this option, you must fill out your petition.
).	Have you filed for	□ N	lo.						
	bankruptcy within the last 8 years?	■ Y	es.						
			District	ND IL WI	D Chapter 13	When	7/31/10	Case number	10-73875
			District			When		Case number	
			District			_ When		Case number	
10.	Are any bankruptcy	■ N	la.						
	cases pending or being								
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ПΥ	es.						
			Debtor					Relationship to y	/ou
			District			When		Case number, if	known
			Debtor					Relationship to y	/ou
			District			_ When		Case number, if	known
11.	Do you rent your	□ N	lo. Go to	line 12.					
	residence?	■ Y		our landlord o	btained an evicti	on judgm	ent against you	and do you want to stay	in your residence?
		·	.	No. Go to li	ne 12.				
			_	Yes. Fill out bankruptcy		t About ar	n Eviction Judgm	nent Against You (Form	101A) and file it with this

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Debtor 1	Geoffrey Paul Woods	Document	Page 4 of 60	Case number (if known)	

Part	Report About Any Bu	sinesses	You Own	as a Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Stat	e & ZIP Code		
	separate sheet and attach it to this petition.		Chec	k the appropriate bo	x to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	he deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statem de and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proc		a small business debtor, you must attach your most recent balance sheet, statement of			
	For a definition of small	■ No.	No. I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptc Code.				
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	4: Report if You Own or	Have Anv	Hazardo	ous Property or An	y Property That Needs Immediate Attention		
	Do you own or have any	■ No.			, ,		
	property that poses or is						
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code		

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Debtor 1 Geoffrey Paul Woods

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Geoffrey Paul Wo	ods	Document	Ca	se number (if known)	
Part	6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily consur individual primarily for a personal,			.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily busine money for a business or investme			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe th	at are not consumer debts of	or business debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.		
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availabl ■ No □ Yes			uded and administrative expenses
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	□ 50	0,001-50,000 0,001-100,000 ore than100,000
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 millio □ \$10,000,001 - \$50 millio □ \$50,000,001 - \$100 mi □ \$100,000,001 - \$500 m	lion	00,000,001 - \$1 billion ,000,000,001 - \$10 billion 0,000,000,001 - \$50 billion ore than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 millio □ \$10,000,001 - \$50 mill □ \$50,000,001 - \$100 mi □ \$100,000,001 - \$500 m	lion	00,000,001 - \$1 billion 1,000,000,001 - \$10 billion 10,000,000,001 - \$50 billion lore than \$50 billion
Part	7: Sign Below					
For	you	I have ex	amined this petition, and I declare u	under penalty of perjury that	the information provi	ded is true and correct.
			chosen to file under Chapter 7, I amates Code. I understand the relief a			
			rney represents me and I did not pa tt, I have obtained and read the noti			y to help me fill out this
I request relief in accordance with the chapter of title 11, United States Code, specified in the				Code, specified in this	petition.	
		bankrupto and 3571	and making a false statement, conc cy case can result in fines up to \$25 ifrey Paul Woods			
		Geoffre	y Paul Woods e of Debtor 1	Signature	e of Debtor 2	
		Executed	September 29, 2017 MM / DD / YYYY	Executed	I on MM / DD / YYY	Υ

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Debtor 1 Geoffrey Paul Woods Page 7 01 60 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Gary C. Flanders	Date	September 29, 2017			
Signature of Attorney for Debtor		MM / DD / YYYY			
Gary C. Flanders					
Printed name			_		
Bankruptcy Clinic					
Firm name					
1 Court Place					
Rockford, IL 61101					
Number, Street, City, State & ZIP Code					
Contact phone 815-962-7084 Email address					
6180219					
Bar number & State					

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		DUCUIII	THE TAUC O OF GO				
Il in this information to identify your case:							
Debtor 1	Geoffrey Paul Wo	ods					
	First Name	Middle Name	Last Name				
Debtor 2							
Spouse if, filing)	First Name	Middle Name	Last Name				
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case number _							

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your a	ssets If what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,490.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	6,490.00
Par	12: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	20,036.00
	Your total liabilities	\$	20,036.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,580.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,687.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	Yes What kind of debt do you have?		
	Vous debte are primarily consumer debte. Consumer debte are those "incurred by an individual primarily for	o noroonal	family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Page 9 of 60 Case number (if known) Debtor 1 Geoffrey Paul Woods

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11: OR Form 122B Line 11: OR Form 122C-1 Line 14

4,139.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	im
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Document Page 10 of 60 Fill in this information to identify your case and this filing: Debtor 1 **Geoffrey Paul Woods** Middle Name Last Name First Name Debtor 2 Middle Name (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevy Who has an interest in the property? Check one Make: 3 1 the amount of any secured claims on Schedule D: **Impala** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2010 Debtor 2 only Current value of the Current value of the 75000 entire property? Approximate mileage: Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another Dealer retail value \$7000.00 \$5,000.00 \$5,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$5,000.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

Debtor 1	Case 17-82286 Doc 1 Filed 09/29/17 Entered 09/29/17 15:51:53 Desc Main Document Page 11 of 60 Geoffrey Paul Woods Case number (if known)
■ Yes.	Describe
	bed, table, dresser, sofa, microwave, etc. with estimated retail value of \$1600.00 \$800.00
□No	nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games Describe
	tv, dvd player with estimated retail value of \$60.00 \$30.00
	cell phone with estimated retail value of \$40.00 \$20.00
Example No	 bles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles Describe
Example ■ No	ent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments Describe
□ No	ns bles: Pistols, rifles, shotguns, ammunition, and related equipment Describe
	2 firearms with estimated retail value of \$900.00 \$450.00
□ No	Describe
	clothing with estimated retail value of \$300.00 \$100.00
□ No	y bles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Describe
	watch with estimated retail value of \$20.00 \$10.00
<i>Exam</i> _l ■ No	prm animals ples: Dogs, cats, birds, horses Describe
□ No	her personal and household items you did not already list, including any health aids you did not list Give specific information

Official Form 106A/B Schedule A/B: Property page 2

Case 17-82286 Doc 1 Filed 09/29/17 Entered 09/29/17 15:51:53 Desc Main Document Page 12 of 60 Case number (if known) Debtor 1 **Geoffrey Paul Woods** hand tools with estimated retail value of \$40.00 \$30.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,440,00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$50.00 17.1. checking **Woodforest Bank** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

Institution name or individual:

No ☐ Yes.

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

page 3

Document Page 13 of 60 Debtor 1 **Geoffrey Paul Woods** Case number (if known) ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information..

Case 17-82286

Doc 1

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Case number (if known) Document

Deb	tor 1	Geoffrey Paul Woods		Case number (if known)	
36.		the dollar value of all of your entries from Part 4, includir art 4. Write that number here			\$50.00
Part	5: De	scribe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ite in Part 1.	
37. C	o you	own or have any legal or equitable interest in any business-relat	ed property?		
	No. Go	o to Part 6.			
	Yes. (Go to line 38.			
Part		escribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	own or Have an Interes	st In.	
46. l	Do yοι	u own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No.	Go to Part 7.			
	☐ Yes	s. Go to line 47.			
	Do yoι	Describe All Property You Own or Have an Interest in That You have other property of any kind you did not already list ples: Season tickets, country club membership			
	Yes.	Give specific information			
54.		the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
55.	Part '	1: Total real estate, line 2			\$0.00
		2: Total vehicles, line 5	\$5,000.00		• • • • • • • • • • • • • • • • • • • •
57.	Part 3	3: Total personal and household items, line 15	\$1,440.00		
58.	Part 4	4: Total financial assets, line 36	\$50.00		
59.	Part :	5: Total business-related property, line 45	\$0.00		
60.	Part (6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$6.490.00	Copy personal property total	\$6.490.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$6,490.00

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		Dodding	T ddc 100	
Fill in this infor	mation to identify your	case:		
Debtor 1	Geoffrey Paul Wo	oods		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the l	Property	You	Claim	as	Exemp	t
---------	----------	-------	----------	-----	-------	----	-------	---

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2010 Chevy Impala 75000 miles Dealer retail value \$7000.00	\$5,000.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2010 Chevy Impala 75000 miles Dealer retail value \$7000.00	\$5,000.00		\$2,600.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
bed, table, dresser, sofa, microwave, etc. with estimated retail value of	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
\$1600.00 Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	
tv, dvd player with estimated retail value of \$60.00	\$30.00		\$30.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
cell phone with estimated retail value of \$40.00	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.2			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Geoffrey Paul Woods

Case number (if known)

				_	<u>_</u>
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2 firearms with estimated retail value of \$900.00	\$450.00		\$450.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
	clothing with estimated retail value of \$300.00	\$100.00		\$100.00	735 ILCS 5/12-1001(a)
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	watch with estimated retail value of \$20.00	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	hand tools with estimated retail value of \$40.00	\$30.00		\$30.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit	
	checking: Woodforest Bank Line from Schedule A/B: 17.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
	Zine irom osinedate /v Zi · · · · ·			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3			led on or after the date of adjustmen	nt.)
	Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	215 days before you filed this case	2
	□ No	.a 2, and exemption wi		,	

Yes

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Fill in this infor				
Debtor 1	Geoffrey Paul Wo	oods		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)		<u> </u>		☐ Check if this is a amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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Document Page 18 of 60 Fill in this information to identify your case: Debtor 1 **Geoffrey Paul Woods** Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 **Credit First** Last 4 digits of account number Unknown Nonpriority Creditor's Name When was the debt incurred? P.O. Box 818011 Cleveland, OH 44181-8011 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify credit purchases

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Debtor 1 Geoffrey Paul Woods Case number (if know) 4.2 1st Gateway Credit Union Last 4 digits of account number \$7.000.00 Nonpriority Creditor's Name c/o RRCA Accounts Management When was the debt incurred? 201 E 3rd Street Sterling, IL 61081 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify deficiency from repossession of vehicle ☐ Yes Bettaiah T. Gowda 4.3 Last 4 digits of account number Unknown Nonpriority Creditor's Name When was the debt incurred? Gastroinestinal Clinic of QC 5041 Utica Road Davenport, IA 52807-3480 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes medical Other. Specify 4.4 Last 4 digits of account number **Captial Management Services LP** \$0.00 Nonpriority Creditor's Name When was the debt incurred? 726 Exchange Street Ste 700 Buffalo, NY 14210-1464 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify notice only ☐ Yes

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Document Page 20 of 60 Debtor 1 Geoffrey Paul Woods Case number (if know) 4.5 Catherine A. Hroziencik, MD Last 4 digits of account number Unknown Nonpriority Creditor's Name 1520 W. 53rd Stret Ste 2 When was the debt incurred? Davenport, IA 52806-2459 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical ☐ Yes 4.6 **Check In to Cash** Last 4 digits of account number Unknown Nonpriority Creditor's Name P.O. Box 550 When was the debt incurred? Cleveland, TN 37364-0550 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes loan Other. Specify 4.7 **Check Into Cash** Last 4 digits of account number Unknown Nonpriority Creditor's Name 3923 41st Ave. When was the debt incurred? Moline, IL 61265-1000 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify loan

Debts to pension or profit-sharing plans, and other similar debts

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Case number (if know)

- Coomby Faul 1100a0		
Credit Collection Services	Last 4 digits of account number	\$0.00
Paymnet Processing Center -27 P.O. Box 55126	When was the debt incurred?	
	As of the date you file the claim is: Cheek all that each	
•	As of the date you me, the damins. Check all that apply	
_	Contingent	
_		
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
•	<u></u>	
Yes	Other. Specify notice only	
Credit First	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name BK-16 Credit Oeprations	When was the debt incurred?	·
Cleveland, OH 44181-0410		
	As of the date you file, the claim is: Check all that apply	
_	Continued.	
	·	
	<u></u>	
debt		
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify notice only	
Credit First NA	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name		
	When was the debt incurred?	
	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	76 of the date you me, the diamine. Shook an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only		
	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other Specify Credit purchases	
	Credit Collection Services Nonpriority Creditor's Name Paymnet Processing Center -27 P.O. Box 55126 Boston, MA 02205-5126 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Credit First Nonpriority Creditor's Name BK-16 Credit Oeprations Cleveland, OH 44181-0410 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Credit First NA Nonpriority Creditor's Name P.O. Box 818011 Cleveland, OH 44181-8011 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset?	Credit Collection Services Nonpriority Creditor's Name Payment Processing Center -27 P.O. Box 55126 Boston, MA 02205-5126 Number Street City State 21p Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only

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Case number (if know) Document Debtor 1 Geoffrey Paul Woods

4.1 1	Credit One Bank	Last 4 digits of account number	Unknown
·	Nonpriority Creditor's Name		
	P.O. Box 98875	When was the debt incurred?	
	Las Vegas, NV 89193-8875 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify credit purchases	
4.1	ER Solutions	Last 4 digits of account number	\$0.00
2	Nonpriority Creditor's Name		
	P.O. Box 9004	When was the debt incurred?	
	Renton, WA 98057-9004 Number Street City State Zlp Code	As of the date you file the claim in Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify notice only	
4.1	Federal RAI Credit Union	Last 4 digits of account number	\$10,000.00
3	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ10,000.00
	P.O. Box 4750	When was the debt incurred?	
	Rock Island, IL 61204-4750 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify deficiency from purchase of vehicle	

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4.1 4	Firestone	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name P.O. Box 81410 Cleveland, OH 44181-0410	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit purchases	
4.1	First Premier	Last 4 digits of account number	Unknown
,	Nonpriority Creditor's Name		
	P.O. Box 524	When was the debt incurred?	
	Sioux Falls, SD 57117-5524 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	on the date year me, the dammer of look an tract appry	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit purchases	
4.1 6	Gateway Medical Imaging	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name P.O. Box 2660 Waterloo, IA 50704-2660	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical	
		· · · ————————————————————————————————	

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Document Page 24 of 60 Debtor 1 Geoffrey Paul Woods Case number (if know) 4.1 John Tomasino \$150.00 Last 4 digits of account number Nonpriority Creditor's Name 200 East Main Street When was the debt incurred? Morrison, IL 61270 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify dental services ☐ Yes 4.1 Kunes Superstore of Mt. Carol \$250.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 764 W. Commercial Street When was the debt incurred? Mount Carroll, IL 61053 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit purchases ☐ Yes 4.1 Llovds Plan Unknown Last 4 digits of account number 9 Nonpriority Creditor's Name 3717 Brady When was the debt incurred? Davenport, IA 52806-6093 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed

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Debt	or 1 Geoffrey Paul Woods	Case number (if know)	
4.2 0	Lloyds Plan, Inc.	Last 4 digits of account number	\$0.00
<u> </u>	Nonpriority Creditor's Name 204 4th Ave. S	When was the debt incurred?	
	Clinton, IA 52732-4311 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice only	
4.2 1	Ludens Potter & Melton Nonpriority Creditor's Name	Last 4 digits of account number	\$490.00
	600 W. Lincolnway P.O. Box 360 Morrison, IL 61270	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify legal services	
4.2 2	Mac's Body Shop	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 16151 Liberty Street Morrison, IL 61270-9653	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	

☐ Yes

debt

■ No

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify credit purchases

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

 $\hfill\Box$ Check if this claim is for a community

Is the claim subject to offset?

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4.2	Main Street Acquisitions Corp	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name		
	c/o Becket & Lee LLP P.O. Box 3001	When was the debt incurred?	
	Malvern, PA 19355-0701		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice only	
1.2	Mediacom Communications		
1	Corporation	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name		
	One Mediacom Way Chester, NY 10918-4850	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify cable	
1.2	Matranalitan Madical Laboraton		Unknown
5	Metropolitan Medical Laboratory Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	1520 7th Street	When was the debt incurred?	
	Peoria, IL 61625-2986		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify medical	
	_ 100	— Outer, Specify	

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Mike's Transmission & Auto Repair	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name 18906 Sand Road Fulton, IL 61252-9729	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify credit purchases	
Morrison Community Hospital	Last 4 digits of account number	Unknowr
Nonpriority Creditor's Name 303 N. Jackson Street Morrison, IL 61270-3099	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify medical	
Morrison Community Hospital	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name P.O. Box 739 Moline, IL 61266-0739	When was the debt incurred?	
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify notice only	

Entered 09/29/17 15:51:53 Case 17-82286 Doc 1 Filed 09/29/17 Desc Main Document Page 28 of 60 Debtor 1 Geoffrey Paul Woods Case number (if know) 4.2 NCO Financial Systems, Inc. \$0.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 507 Prudential Road When was the debt incurred? Horsham, PA 19044-2308 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify notice only ☐ Yes 4.3 Premier Bankcard/Charter Unknown Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 2208 When was the debt incurred? Vacaville, CA 95696-8208 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit purchases ☐ Yes 4.3 **RRCA Accounts Management** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 201 E. 3rd Street When was the debt incurred? Sterling, IL 61081-3611

Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify notice only

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Debtor 1 Geoffrey Paul Woods

Debtor 1 Geoffrey Paul Woods

Description:

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Case number (if know)

Santander Consumer USA	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name 8585 N. Stemmon Fwy Ste Dallas, TX 75247-3822	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify deficenciency from purchase of vehicle	
Soderstrom Dermatology	Last 4 digits of account number	\$136.00
Nonpriority Creditor's Name c/o T-H Professional Medical Collection P.O. Box 10166	When was the debt incurred?	
Peoria, IL 61612 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	7.6 of the date year me, the stain is. One of all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical	
Spring Park Oral Surgeons	Last 4 digits of account number	\$1,700.00
Nonpriority Creditor's Name 5345 Srping Street Davenport, IA 52807	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify dental services	

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Thomas Wiebenga-builder	Last 4 digits of account number	Unknowi
Nonpriority Creditor's Name 4606 180th Street	When was the debt incurred?	
Clinton, IA 52732-8746	when was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify credit purchases	
Today's Dental	Last 4 digits of account number	Unknow
Nonpriority Creditor's Name		
Dvaid M Leners, DDS 1801 Manufacturing Drive	When was the debt incurred?	
Clinton, IA 52732-6730 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no of the date year me, the stanner of sook an that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify dental services	
Transmissions Pluc	Last 4 digits of account number	\$260.0
Nonpriority Creditor's Name	When we the debt in some 40	
510 1st Street P.O.Box 677	When was the debt incurred?	
Colona, IL 61241		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
	■ Other. Specify credit purchases	

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Debto	r 1 Geoffrey Paul Woods	Document Page 31 of 60 Case number (if know)	
4.3	Urological Assocates	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name c/o H & R Accounts 5320 22nd Street Moline, IL 61266	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice only	
4.3	Urological Assoicates	Last 4 digits of account number	\$50.00
	Nonpriority Creditor's Name 3319 Spring Street Suite 202 Davenport, IA 52807	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.4	Verizon	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name		
	P.O. Box 28002 Lehigh Valley, PA 18002-8002	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	

Part 3: List Others to Be Notified About a Debt That You Already Listed

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

debt

■ No

☐ Yes

report as priority claims

■ Other. Specify telephone

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Geoffrey Paul Woods

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				7	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	20,036.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	20,036.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Geoffrey Paul Wo	oods		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this
				amended filin

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Ken Kophammer, Landlord

State what the contract or lease is for
Rental of apartment (month to month).

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Fill in this	information to identify your			
Debtor 1	Geoffrey Paul W	oods		
Dobioi i	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filin	ng) First Name	Middle Name	Last Name	
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case numb	her			
(if known)				☐ Check if this is an
				amended filing
Sched	I Form 106H lule H: Your Cod		ets vou may have Re a	12/15 as complete and accurate as possible. If two married
eople are ill it out, a	filing together, both are equ	ually responsible for supper boxes on the left. Attach	olying correct information the Additional Page (is complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page to this page. On the top of any Additional Pages, write
1. Do y	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.
■ No				
☐ Yes	3			
Arizona No.	hin the last 8 years, have yo a, California, Idaho, Louisiana Go to line 3. 5. Did your spouse, former spo	a, Nevada, New Mexico, Pu	erto Rico, Texas, Wash	ry? (Community property states and territories include ington, and Wisconsin.)
in line Form out Co	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Official Deg). Use Schedule D, Schedule E/F, or Schedule G to f
	Name, Number, Street, City, State and 2	ZIP Code		Check all schedules that apply:
2.4				Cabadida D. Sas
3.1	Name			
				☐ Schedule G, line
-				
	Number Street City	State	ZIP Code	
	, 			
3.2				□ Schodulo D. lino
	Name			□ Schedule D, line □ Schedule E/F, line
				☐ Schedule G, line
=	N			
	Number Street City	State	ZIP Code	
	•			

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	in this information to ide									
Del	otor 1 Ge	eoffrey Pau	ıl Woods			_				
	otor 2 ouse, if filing)									
Uni	ted States Bankruptcy C	Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		_				
	se number							d filing ent show	ving postpetition	
\bigcirc	fficial Form 10	nel					13 income a	as of the	following date:	
	fficial Form 10 chedule I: Yo						MM / DD/ Y	YYY		12/15
sup spo atta	plying correct informatuse. If you are separat	tion. If you ed and you this form. (ible. If two married peo are married and not filin r spouse is not filing wi On the top of any additi	ng jointly, and yo th you, do not in	ur spouse i clude inforr	s liv nati	ing with you, incluen about your spo	ude info ouse. If r	rmation about more space is	your needed,
1.	Fill in your employment information.	ent		Debtor 1			Debtor 2	or non	-filing spouse	
	If you have more than attach a separate paginformation about addi	e with	Employment status	■ Employed□ Not employed	ed		☐ Emplo	•	I	
	employers.		Occupation	Labor						
	Include part-time, seas self-employed work.	sonal, or	Employer's name	The George I	Evans Cor	pora	ation			
	Occupation may include or homemaker, if it app		Employer's address	121 37th Stre Moline, IL 61						
			How long employed to	nere? 2 mc	onths					
Par	t 2: Give Details	About Mon	thly Income							
	mate monthly income use unless you are sepa		te you file this form. If	you have nothing	to report for	any	ine, write \$0 in the	space. I	Include your noi	n-filing
	u or your non-filing spou e space, attach a separa		re than one employer, co	ombine the informa	ation for all e	emplo	oyers for that perso	n on the	e lines below. If	you need
							For Debtor 1		Debtor 2 or Filing spouse	
2.			y, and commissions (be alculate what the monthl		2.	\$	2,000.00	\$	N/A	
3.	Estimate and list mo	nthly overti	me pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Inco	me. Add lin	e 2 + line 3.		4.	\$	2,000.00	\$	N/A	

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Debt	or 1	Geoffrey Paul Woods		Ca	ase number (<i>if ki</i>	nown)				
				F	For Debtor 1			Debtor		
	Cor	by line 4 here	4.	9	2,000	00	\$	า-filing s	spouse N/A	
				Ì			_		14/7	<u>-</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.			0.00	\$_		N/A	_
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$_		N/A	_
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.			0.00 0.00	\$_ \$		N/A N/A	_
	5e.	Insurance	5u. 5e.			0.00	\$ 		N/A	
	5f.	Domestic support obligations	5f.			0.00	\$		N/A	_
	5g.	Union dues	5g.			0.00	\$		N/A	_
	5h.	Other deductions. Specify:	5h.			0.00	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	420	0.00	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,580	0.00	\$_		N/A	<u>.</u>
8.	List 8a.	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-				•			
	٥h	monthly net income.	8a.			0.00	\$_ \$		N/A	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b.	. 1		0.00	Φ_		N/A	<u>.</u>
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	9	5 (0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	. 9	6	0.00	\$		N/A	_
	8e.	Social Security	8e.	. 9	6	0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	9	·	0.00	\$_		N/A	<u>.</u>
	8g.	Pension or retirement income	8g.			0.00	\$_		N/A	_
	8h.	Other monthly income. Specify:	8h.	+ \$	5	0.00	+ \$_		N/A	<u>-</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	(0.00	\$_		N/	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1,580.00	+ \$		N/A	= \$	1,580.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,					,
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not scify:	depe						e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$Combi	1,580.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?							ly income
		Yes. Explain: Deduction for medical insurance.								

Official Form 106I Schedule I: Your Income page 2

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Fill in	this informa	ation to identify yo	our case:					
Debto		Geoffrey Pa		3			k if this is: An amended filing	
Debto							A supplement show	ving postpetition chapter
``	ise, if filing)					_	<u> </u>	the following date:
United	d States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS	ľ	MM / DD / YYYY	
Case (If kno	number own)							
		orm 106J						
		J: Your			o filipa to acthor b	ath are agua	lly roomanaihla fa	12/15
infor	mation. If m		eded, atta	. If two married people ar ch another sheet to this n.				
Part 1		ribe Your House	ehold					
	Is this a joir No. Go to							
			in a separ	ate household?				
	□ N □ Y	-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2	
2.		e dependents?	■ No	a	ror coparato riodos		·· =·	
	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
		penses include of people other t	han	No				
		d your depende		Yes				
Part 2		ate Your Ongoi						
expe				uptcy filing date unless y y is filed. If this is a supp				
the v		h assistance an		government assistance i cluded it on Sc <i>hedule I:</i> \			Your expe	enses
(Onic	ciai Form 10	וסו.)					1 Out Oxp	
		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4. \$		400.00
	If not includ	ded in line 4:						
		estate taxes				4a. \$	-	0.00
		erty, homeowner's				4b. \$		0.00
		e maintenance, re eowner's associa		upkeep expenses dominium dues		4c. \$ 4d. \$		0.00
				our residence, such as ho	me equity loans	5. \$		0.00

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Debtor 1	Geoffrey Paul Woods	Case num	oer (if known)	
S. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	150.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	45.00
6d.		6d.	·	0.00
	od and housekeeping supplies		\$	400.00
	Idcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.	\$	150.00
	sonal care products and services	10.	\$	60.00
	dical and dental expenses	11.	\$	150.00
	nsportation. Include gas, maintenance, bus or train fare.	11.	Ψ	150.00
	not include car payments.	12.	\$	300.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	aritable contributions and religious donations	14.	\$	0.00
	urance.			0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b	o. Health insurance	15b.	\$	0.00
150	:. Vehicle insurance	15c.	\$	32.00
	I. Other insurance. Specify:	15d.	\$	0.00
	tes. Do not include taxes deducted from your pay or included in lines 4 or 20.		-	0.00
	ecify:	16.	\$	0.00
	tallment or lease payments:		•	
	. Car payments for Vehicle 1	17a.	\$	0.00
	car payments for Vehicle 2	17b.	\$	0.00
	: Other. Specify:	17c.	\$	0.00
	I. Other. Specify:	17d.		0.00
	ur payments of alimony, maintenance, and support that you did not report as			
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	ner payments you make to support others who do not live with you.		\$	0.00
Spe	ecify:	19.		
	ner real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Yo	ur Income.	
20a	n. Mortgages on other property	20a.	\$	0.00
20b	o. Real estate taxes	20b.	\$	0.00
200	. Property, homeowner's, or renter's insurance	20c.	\$	0.00
200	I. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e	e. Homeowner's association or condominium dues	20e.	\$	0.00
. Oth	ner: Specify:	21.	+\$	0.00
			·	
	culate your monthly expenses			
	a. Add lines 4 through 21.		\$	1,687.00
22b	o. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	. Add line 22a and 22b. The result is your monthly expenses.		\$	1,687.00
				<u> </u>
	culate your monthly net income.		•	- -
	n. Copy line 12 (your combined monthly income) from Schedule I.	23a.		1,580.00
23b	c. Copy your monthly expenses from line 22c above.	23b.	-\$	1,687.00
-	Out the state of the same and t			
230	Subtract your monthly expenses from your monthly income.	23c.	\$	-107.00
	The result is your monthly net income.	200.	*	107.00
For	you expect an increase or decrease in your expenses within the year after y example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage?			er decrease because o
	Yes. Explain here:			
	IES. Explain Hole.			

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	mation to identify your	case:			
Debtor 1	Geoffrey Paul Wo				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					
					amended filing
Official For	m 106Dec				
Declara	tion About a	ın Individual	Debtor's Sch	nedules	12/15
Sig	ın Below	,			
Did you pa	<u>.</u>				
	ay or agree to pay some	one who is NOT an attor	rney to help you fill out ba	nkruptcy forms?	
■ No	ay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	nkruptcy forms?	
-	ay or agree to pay some Name of person	one who is NOT an attor	ney to help you fill out ba	Attach <i>Bankruptcy Pe</i>	etition Preparer's Notice,
_		eone who is NOT an attor	rney to help you fill out ba	Attach <i>Bankruptcy Pe</i>	etition Preparer's Notice, nature (Official Form 119)
☐ Yes. Under pena	Name of person		rney to help you fill out bar	Attach Bankruptcy Pe Declaration, and Sigr	
☐ Yes. Under pena	Name of person alty of perjury, I declare re true and correct.			Attach Bankruptcy Pe Declaration, and Sigr	
☐ Yes. Under penathat they ar	Name of person alty of perjury, I declare		nmary and schedules filed	Attach Bankruptcy Pe Declaration, and Sign with this declaration and	
Under penathat they ar	Name of person alty of perjury, I declare re true and correct. offrey Paul Woods		nmary and schedules filed	Attach Bankruptcy Pe Declaration, and Sign with this declaration and	

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Fill in	this inform	ation to identify you	r case:			
Debte	or 1	Geoffrey Paul W				
Debte	or 2	First Name	Middle Name	Last Name		
	se if, filing)	First Name	Middle Name	Last Name		
Unite	d States Ban	kruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case	number					
(if know						Check if this is an
						amended filing
~		4.07				
	cial For					
Sta	tement	of Financial .	Affairs for Individ	duals Filing for B	ankruptcy	4/10
			ble. If two married people a attach a separate sheet to			
). Answer every que			, additional pagoo, write ye	an name and sacc
Part	1: Give De	etails About Your Ma	rital Status and Where You	Lived Before		
1. V	Vhat is your	current marital statu	ıs?			
_	_					
I		ied				
_						
2. [Juring the la	st 3 years, have you	lived anywhere other than v	where you live now?		
[□ No					
	Yes. List	all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	312 18th Pl Clinton, IA	lace	From-To: 2012-2015	☐ Same as Debtor	I	☐ Same as Debtor 1 From-To:
	and territorie	es include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev nedule H: Your Codebtors (Of	vada, New Mexico, Puerto R		
Part	2 Explain	the Sources of You	r Income			
F	ill in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-	time activities.	endar years?
	□ No					
ı	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$19,500.00	☐ Wages, commissions, bonuses, tips	 ,
			☐ Operating a business		☐ Operating a business	
			- Operating a business		-,	

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Page 41 of 60 Case number (if known) Debtor 1 Geoffrey Paul Woods

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco	
For last calendar year: (January 1 to December	31, 2016)	■ Wages, commissions, bonuses, tips	\$28,120.00	☐ Wages, comm bonuses, tips	issions,
		☐ Operating a business		☐ Operating a but	usiness
For the calendar year be (January 1 to December		■ Wages, commissions, bonuses, tips	\$29,235.00	☐ Wages, comm bonuses, tips	issions,
		☐ Operating a business		Operating a bu	usiness
and other public bene winnings. If you are fi	efit payments; ling a joint cas the gross inco	pensions; rental income; inte e and you have income that		ted from lawsuits; ro nly once under Deb	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incording Describe below.	me Gross income (before deductions and exclusions)
From January 1 of curre the date you filed for ba		Unemployment Compensation	\$2,200.00		
For last calendar year: (January 1 to December	31, 2016)	Unemployment Compensation	\$1,332.00		
Part 3: List Certain P	avmonte Vou	Made Before You Filed for	Pankruntev		
			· •		
☐ No. Neither D	ebtor 1 nor D	s debts primarily consume ebtor 2 has primarily const personal, family, or househo	umer debts. Consumer debts	are defined in 11 L	J.S.C. § 101(8) as "incurred by an
			id you pay any creditor a total	of \$6,425* or more	?
□ _{No.} □ _{Yes}	Go to line 7		'-l - (-(-l - (and and the total array of the
	paid that cre not include	editor. Do not include paymer payments to an attorney for t	nts for domestic support oblig	ations, such as child	nents and the total amount you d support and alimony. Also, do adjustment.
		r both have primarily consure you filed for bankruptcy, d	umer debts. id you pay any creditor a total	of \$600 or more?	
■ No.	Go to line 7				
☐ Yes	include pay		id a total of \$600 or more and obligations, such as child supp		ou paid that creditor. Do not so, do not include payments to an
Creditor's Name an	d Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this payment for

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	Geoffrey Paul Woods		Cas	se number (if known)		
<i>Insi</i> a	in 1 year before you filed for bankru lers include your relatives; any general nich you are an officer, director, persor siness you operate as a sole proprieto ony.	partners; relatives of any gen in control, or owner of 20% (eneral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a genera ny managing a	al partner; corporation gent, including one f
	No					
	Yes. List all payments to an insider.					
Insi	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
insid	in 1 year before you filed for bankruder? de payments on debts guaranteed or o		yments or transfer a	any property on a	ccount of a de	ebt that benefited a
■	No Yes. List all payments to an insider					
Insi	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Part 4:	Identify Legal Actions, Repossess		_			
With	in 1 year before you filed for bankri	intex were you a party in a	ny lawsuit court ac	tion or administr	ative proceed	lina?
List a	in 1 year before you filed for bankru all such matters, including personal inju ifications, and contract disputes.					
List a	all such matters, including personal inju					
List a	all such matters, including personal injufications, and contract disputes.					
List a mod	all such matters, including personal injufications, and contract disputes. No			on suits, paternity a		t or custody
List a modi	all such matters, including personal injuffications, and contract disputes. No Yes. Fill in the details. se title	ury cases, small claims action	Court or agency Workers' Com	on suits, paternity a	ctions, suppor	e case
List a modi	all such matters, including personal injuffications, and contract disputes. No Yes. Fill in the details. Se title Se number	Nature of the case	ns, divorces, collection	on suits, paternity a	Status of th	e case
List a modi	all such matters, including personal injuffications, and contract disputes. No Yes. Fill in the details. Se title Se number	Nature of the case Workers'	Court or agency Workers' Com	on suits, paternity a	Status of th	e case
List a mod	all such matters, including personal injuffications, and contract disputes. No Yes. Fill in the details. Se title Se number	Nature of the case Workers' Compensation	Court or agency Workers' Comp	on suits, paternity a	Status of th Pending On appe Conclud	e case al
List a mod	all such matters, including personal injuffications, and contract disputes. No Yes. Fill in the details. Se title Se number ods vs. Rockriver Arm with 1 year before you filed for bankruck all that apply and fill in the details be the No. Go to line 11. Yes. Fill in the information below.	Nature of the case Workers' Compensation	Court or agency Workers' Comp Commission	pensation	Status of th Pending On appe Conclud	e case al ed i, seized, or levied?
List a mod	all such matters, including personal injuffications, and contract disputes. No Yes. Fill in the details. See title See number ods vs. Rockriver Arm In 1 year before you filed for bankruck all that apply and fill in the details be No. Go to line 11.	Nature of the case Workers' Compensation uptcy, was any of your propelow.	Court or agency Workers' Comp Commission Derty repossessed, f	on suits, paternity a	Status of th Pending On appe Conclud	e case al ed I, seized, or levied?
List a mod	all such matters, including personal injuffications, and contract disputes. No Yes. Fill in the details. Se title Se number ods vs. Rockriver Arm with 1 year before you filed for bankruck all that apply and fill in the details be the No. Go to line 11. Yes. Fill in the information below.	Nature of the case Workers' Compensation	Court or agency Workers' Comp Commission Derty repossessed, f	pensation	Status of the Pending On appe Conclud	e case al ed Value of the propert
List a mod	all such matters, including personal injuffications, and contract disputes. No Yes. Fill in the details. Se title Se number ods vs. Rockriver Arm Inin 1 year before you filed for bankruck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. ditor Name and Address	Nature of the case Workers' Compensation uptcy, was any of your propelow. Describe the Property Explain what happene 2008 Lexus SUV	Court or agency Workers' Comp Commission Derty repossessed, f	pensation Foreclosed, garnis	Status of the Pending On appe Conclud	e case al
List a mod	all such matters, including personal injuffications, and contract disputes. No Yes. Fill in the details. Se title Se number ods vs. Rockriver Arm Inin 1 year before you filed for bankruck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. ditor Name and Address	Nature of the case Workers' Compensation Uptcy, was any of your propelow. Describe the Property Explain what happene 2008 Lexus SUV Property was reposs	Court or agency Workers' Comp Commission Derty repossessed, f	pensation Foreclosed, garnis	Status of the Pending On appe Conclud	e case al ed Value of the propert
List a mod	all such matters, including personal injuffications, and contract disputes. No Yes. Fill in the details. Se title Se number ods vs. Rockriver Arm Inin 1 year before you filed for bankruck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. ditor Name and Address	Nature of the case Workers' Compensation uptcy, was any of your propelow. Describe the Property Explain what happene 2008 Lexus SUV	Court or agency Workers' Comp Commission Derty repossessed, f	pensation Foreclosed, garnis	Status of the Pending On appe Conclud	e case al ed Value of the propert

☐ Property was attached, seized or levied.

2015 Chevy Malibu

■ Property was repossessed.□ Property was foreclosed.□ Property was garnished.

Federal RAI Credit Union

\$9,000.00

2017

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11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be No Yes. Fill in the details.	ptcy, did any creditor, including a bank or financial in cause you owed a debt?	stitution, set off any a	amounts from your
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12. Par	court-appointed receiver, a custodian, or No Yes	tcy, was any of your property in the possession of an another official?	assignee for the bene	efit of creditors, a
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co	otcy, did you give any gifts or contributions with a totantribution.	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	or gambling? ■ No □ Yes. Fill in the details.	tcy or since you filed for bankruptcy, did you lose any		
	how the loss occurred	Describe any insurance coverage for the loss nclude the amount that insurance has paid. List pending nsurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or pr	tcy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? eparers, or credit counseling agencies for services require		rty to anyone you
	□ No ■ Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not Yo	transferred	or transfer was made	payment
	Bankruptcy Clinic 1 Court Place Rockford, IL 61101	Attorney Fees	2017	\$650.00
	Summit Financial Educatiobn	Credit Counseling	2017	\$50.00

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20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No П

Yes. Fill in the details.				
Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Wood Forest Bank	xxxx-	■ Checking □ Savings □ Money Market □ Brokerage □ Other	2016	\$0.00

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

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Debtor 1 Geoffrey Paul Woods

22.	Have you stored property in a storage unit or pla	ace other than your home within	year before yo	u filed for bankruptcy?	?			
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the c	ontents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control for S	Someone Else						
23.	Do you hold or control any property that someone for someone.	ne else owns? Include any prope	ty you borrowe	d from, are storing for	, or hold in trust			
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the p	roperty	Value			
Par	t 10: Give Details About Environmental Informa	tion						
For	the purpose of Part 10, the following definitions a	apply:						
-	Environmental law means any federal, state, or I toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub	r, land, soil, surface water, groun stances, wastes, or material.	dwater, or other	medium, including sta	atutes or			
_	Site means any location, facility, or property as to own, operate, or utilize it, including disposal s		law, whether yo	u now own, operate, o	or utilize it or used			
	Hazardous material means anything an environr hazardous material, pollutant, contaminant, or s		s waste, hazardo	ous substance, toxic s	ubstance,			
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of whe	n they occurred					
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in vio	lation of an environme	ental law?			
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)		ental law, if you	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		ental law, if you	Date of notice			
26.	Have you been a party in any judicial or adminis	·	ironmental law?	Include settlements a	and orders.			
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the o	ase	Status of the case			
Par	t 11: Give Details About Your Business or Conr	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, d	•	•		business?			
	☐ A sole proprietor or self-employed in a tr☐ A member of a limited liability company	•		or part-time				
	_ / mombor of a minica hability company	(, orou hability partitors	-F ()					

Case 17-82286 Doc 1 Filed 09/29/17 Entered 09/29/17 15:51:53 Document Page 46 of 60 **Geoffrey Paul Woods** Case number (if known) Debtor 1 ☐ A partner in a partnership ■ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Geoffrey Paul Woods **Geoffrey Paul Woods** Signature of Debtor 2 Signature of Debtor 1 Date Date September 29, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

☐ Yes

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			3	
Fill in this infor	mation to identify your	case:		
Debtor 1	Geoffrey Paul Wo			
Debior 1	First Name	Middle Name	Last Name	
Debtor 2	-			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number _				☐ Check if this is an amended filing
If you are an ind		pter 7, you must fi	viduals Filing Under Chapt	er 7 12/15
_				
You must file thi	ever is earlier, unless th	vithin 30 days after	not expired. you file your bankruptcy petition or by the date see time for cause. You must also send copies to the	
	eople are filing togethe nd date the form.	r in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
	and accurate as possik our name and case nu		s needed, attach a separate sheet to this form. Or	n the top of any additional pages,
Part 1: List Y	our Creditors Who Hav	e Secured Claims		
For any credit information be		art 1 of Schedule D	D: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
Identify the cr	reditor and the property t	that is collateral	What do you intend to do with the property the	
			secures a debt?	as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	_
Description of	f		Retain the property and enter into a	☐ Yes
property	•		Reaffirmation Agreement. Retain the property and [explain]:	
securing debt	:		— Notain the property and [explain].	
Creditor's			Common donath a nagarante	□ No
name:			☐ Surrender the property. ☐ Retain the property and redeem it.	LI NO
			Retain the property and enter into a	☐ Yes

Official Form 108

Creditor's

Description of

securing debt:

Description of

securing debt:

property

Creditor's

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Retain the property and enter into a

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 $\hfill\square$ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Reaffirmation Agreement.

☐ Surrender the property.

☐ No

☐ Yes

☐ No

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Deb	tor 1 Geoffrey	Paul Woods	Case number (if	known)
D p	ame: rescription of roperty ecuring debt:		 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
or an th	any unexpired per e information belo may assume an u	ow. Do not list real estate leases. Un nexpired personal property lease if	I in Schedule G: Executory Contracts and Une nexpired leases are leases that are still in effect the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended. 5(p)(2).
Des	cribe your unexp	ired personal property leases		Will the lease be assumed?
Les	sor's name:	Ken Kophammer, Landlord		□ No
	cription of leased perty:	Rental of apartment (month to	month).	■ Yes
Jnde	er penalty of perju		y intention about any property of my estate th	at secures a debt and any personal
Χ	/s/ Geoffrey Pa	ul Woods	X	
	Geoffrey Paul Signature of Debt		Signature of Debtor 2	
	Date Septer	mber 29, 2017	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-82286 Doc 1 Filed 09/29/17 Entered 09/29/17 15:51:53 Desc Main Document Page 53 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Geoffrey Paul Woods		Case N)	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR I	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of the debtor (s) in contemplation of the debtor (of the petition in bankruptc	y, or agreed to be pa	id to me, for services rend	lered or to
	For legal services, I have agreed to accept		\$	650.00	
	Prior to the filing of this statement I have received		\$	650.00	
	Balance Due		\$	0.00	
2.	\$335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compen	sation with any other perso	n unless they are mo	embers and associates of m	ıy law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name.				firm. A
6.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspe	cts of the bankruptc	y case, including:	
	a. Analysis of the debtor's financial situation, and renderirb. Preparation and filing of any petition, schedules, statemc. Representation of the debtor at the meeting of creditorsd. [Other provisions as needed]	nent of affairs and plan which	ch may be required;		ptcy;
7.	By agreement with the debtor(s), the above-disclosed fee d Applicable to Chapter 7: \$75.00 for each p of motion for court approval of reaffirmatic \$250.00 per hour plus costs (when applica Representation does not include defense dismissal proceedings, reinstatement proceedings actions or other adversary proceedings to approve reaffirmation agreement	ost-petition amendmen on agreement, and atte able) for all other repres of discharge or dischar ceedings, judicial lien a eedings or attendance	t to Schedules; \$ ndance at hearing tentation. geability procee tvoidances, post	g if required by the co dings, redemption pro- petition amendments,	urt; ceedings, relief
	···	CERTIFICATION			
	I certify that the foregoing is a complete statement of any a pankruptcy proceeding.		or payment to me for	r representation of the deb	otor(s) in
S	September 29, 2017	/s/ Gary C. Fland			<u></u>
L	Date Control of the C	Gary C. Flander Signature of Attori			
		Bankruptcy Clir			
		1 Court Place Rockford, IL 61	101		
		815-962-7084 F	ax: 815-987-3759)	_
		Name of law firm			

DOCBANKRUPINGEY5@10fNAC

GARY C. FLANDERS Attorney at Law

One Court Place, Suite 201 Rockford, Illinois 61101 Telephone: 815/962-7084

This agreement is executed this	2 day of
---------------------------------	----------

Type of Bankruptcy

Client retains attorney Gary C. Flanders to file a Chapter 7 bankruptcy. If the client determines at a later date that client desires to file a Chapter 13 bankruptcy, the parties shall execute a new fee contract setting forth the terms of such representation.

2. Services Provided by Attorney:

Contingent upon being paid for the services as specified below, the attorney shall provide the following legal services for the client: Preparation and filing of Chapter 7 Petition in Bankruptcy.

Fees

The base fee for the filir for a total of \$ date of this agreement.	g of the bankrup	tcy is \$	5/ ar	d filing fee	\$335.00
for a total of \$	25 — tol	be paid prior	to filing and	within six mo	onths of the
date of this agreement.	"The amount of the	he filing fee i	may increase	.	

Additional costs required on a case-by-case basis include:

- a). Mandatory prepetition credit counseling and post-petition financial education (all cases).
- (b). Tax transcripts
- c). Credit report (recommended).

If the fees are not paid as stated above and as a result the amount of legal service to be provided by the attorney and/or his staff is increased, the fee shall be increased accordingly to compensate the attorney for the additional time and expense in providing the legal services.

4. Terms of Payment

- a). The fees shall be paid in full prior to the filing of the bankruptcy.
- b). Client has paid \$\frac{1}{2} as a retainer fee. This amount has been earned upon receipt by the attorney and is not refundable.
- c). No earned portion of any fee received is refundable.

5. Services Not Provided Under the Base Fee

Representation does not include defense of discharge or dischargeability proceedings, redemption proceedings, dismissal proceedings, reinstatement proceedings, judicial lien avoidances, post-petition amendments, relief from stay actions or other adversary proceedings or attendance at continued meeting of creditors, preparation of motion to approve reaffirmation agreement (when in sole discretion of attorney a reaffirmation motion is required).

6 W

6. Compensation For Services Not Covered Under Base Fee

- a). It is understood that if attorney and client agree that attorney is to provide services described in paragraph 5 a separate retainer agreement detailing such services and associated costs will be signed by attorney and client.
- b). \$75.00 for preparation and filing of each amendment to the bankruptcy Schedules or Statement of Financial Affairs.
- c). \$75.00 for preparation and filing of motion for court approval of reaffirmation agreement, and attendance at hearing if required by the court.
- d). \$500.00 for motion to reopen Chapter 7 case if client fails to satisfy post-petition financial education requirements.
- e). The client understands that if the client does not pay the fees as set forth above, the Attorney has no obligation to provide the services, and has the right to file a motion to withdraw as the attorney for the client.

7. Client's Obligations

The client's obligations are as follows:

- a). To pay the fees as set forth above.
- b). To provide accurately, honestly and in a timely manner, all the information including all documents necessary to prepare and file the Chapter 7 bankruptcy.
- c). To satisfy prepetition credit counseling and postpetition financial education requirements.
- d). To keep the attorney advised at all times of the client's address and telephone numbers.
- e). To attend the 341 Creditors Meeting and other hearings set in the case as advised by attorney.
- f). To provide any information requested of the client by the Chapter 7 Trustee, the U.S. Trustee, or any other party in interest, unless the Court rules that the client is not required to provide the information.
- g). To respond immediately to any requests of the client by the attorney's staff.
- 8. Attorney is authorized to disburse from his Client Trust Account, when applicable, funds for payment of filing fees, costs, attorney fees and refunds.

Gary C. Flanders

Client

Client

Client acknowledges receipt of a copy of this agreement.

We are a debt relief agency. We help people file for bankruptcy relief under the Bankruptcy Code.

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United States Bankruptcy Court Northern District of Illinois

		Not therm District of Hillions		
In re	Geoffrey Paul Woods		Case No.	
		Debtor(s)	Chapter	7
	VE	CRIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	41
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	rs is true and	correct to the best of my
Date:	September 29, 2017	/s/ Geoffrey Paul Woods Geoffrey Paul Woods Signature of Debtor		

Credit First P.O. Box 818011 Cleveland, OH 44181-8011

1st Gateway Credit Union c/o RRCA Accounts Management 201 E 3rd Street Sterling, IL 61081

Bettaiah T. Gowda Gastroinestinal Clinic of QC 5041 Utica Road Davenport, IA 52807-3480

Captial Management Services LP 726 Exchange Street Ste 700 Buffalo, NY 14210-1464

Catherine A. Hroziencik, MD 1520 W. 53rd Stret Ste 2 Davenport, IA 52806-2459

Check In to Cash P.O. Box 550 Cleveland, TN 37364-0550

Check Into Cash 3923 41st Ave. Moline, IL 61265-1000

Credit Collection Services
Paymnet Processing Center -27
P.O. Box 55126
Boston, MA 02205-5126

Credit First BK-16 Credit Oeprations Cleveland, OH 44181-0410

Credit First NA P.O. Box 818011 Cleveland, OH 44181-8011 Credit One Bank
P.O. Box 98875
Las Vegas, NV 89193-8875

ER Solutions P.O. Box 9004 Renton, WA 98057-9004

Federal RAI Credit Union P.O. Box 4750 Rock Island, IL 61204-4750

Firestone P.O. Box 81410 Cleveland, OH 44181-0410

First Premier P.O. Box 524 Sioux Falls, SD 57117-5524

Gateway Medical Imaging P.O. Box 2660 Waterloo, IA 50704-2660

John Tomasino 200 East Main Street Morrison, IL 61270

Ken Kophammer, Landlord

Kunes Superstore of Mt. Carol 764 W. Commercial Street Mount Carroll, IL 61053

Lloyds Plan 3717 Brady Davenport, IA 52806-6093

Lloyds Plan, Inc. 204 4th Ave. S Clinton, IA 52732-4311 Ludens Potter & Melton 600 W. Lincolnway P.O. Box 360 Morrison, IL 61270

Mac's Body Shop 16151 LIberty Street Morrison, IL 61270-9653

Main Street Acquisitions Corp c/o Becket & Lee LLP P.O. Box 3001 Malvern, PA 19355-0701

Mediacom Communications Corporation One Mediacom Way Chester, NY 10918-4850

Metropolitan Medical Laboratory 1520 7th Street Peoria, IL 61625-2986

Mike's Transmission & Auto Repair 18906 Sand Road Fulton, IL 61252-9729

Morrison Community Hospital 303 N. Jackson Street Morrison, IL 61270-3099

Morrison Community Hospital P.O. Box 739 Moline, IL 61266-0739

NCO Financial Systems, Inc. 507 Prudential Road Horsham, PA 19044-2308

Premier Bankcard/Charter P.O. Box 2208 Vacaville, CA 95696-8208

RRCA Accounts Management 201 E. 3rd Street Sterling, IL 61081-3611

Santander Consumer USA 8585 N. Stemmon Fwy Ste Dallas, TX 75247-3822

Soderstrom Dermatology c/o T-H Professional Medical Collection P.O. Box 10166 Peoria, IL 61612

Spring Park Oral Surgeons 5345 Srping Street Davenport, IA 52807

Thomas Wiebenga-builder 4606 180th Street Clinton, IA 52732-8746

Today's Dental Dvaid M Leners, DDS 1801 Manufacturing Drive Clinton, IA 52732-6730

Transmissions Pluc 510 1st Street P.O.Box 677 Colona, IL 61241

Urological Assocates c/o H & R Accounts 5320 22nd Street Moline, IL 61266

Urological Assoicates 3319 Spring Street Suite 202 Davenport, IA 52807

Verizon
P.O. Box 28002
Lehigh Valley, PA 18002-8002